Addition to Personnel Name List/Qualifications

(Forms should be typewritten)

It is the responsibility of the investigator to update the Personnel Name List and assure that mandated training is done. Additionally, Federal regulations require Occupational Health and Training Programs be offered to the listed individuals.

Please complete the following and describe qualifications [education, training, relevant experience with the proposed species and technical procedure(s)] for any individual with animal contact you wish to add to your protocol.

Add to CHUA #(s) 686

viewing in your department or at home.

Name:	Kasaku Ohinata PhD	Degree: PhD
Departmen	nt: Suremy/ Neuroscience	Extension 44310
Home Pho	one:	E-mail:
Has this is video? Ye	ndividual attended the Introductory Training es No (Circle one) If no, see below for a	g Session or viewed the training dditional information*.
Qualificati	ions for the proposed study:	
	Post-doctoral fellow wi-	ten recently completed PhD
Bach	gound in molecular biology a	
	europhysiology and cell w	
pim	suly on NIH funded concer 1	anovexia Bypotalamic
inad	el.	
If unfamilia	r with this species/procedure, please indicate person	
certify th	at this individual will be properly trained p	Rev. 1/21 rior to beginning work on animals.
PI Signatu		Date: 7 (8 0
*Note: It is sessio	mandatory for all personnel (including Principal I on covering laws and regulations pertaining to ani	nvestigators) to have participated in a train nal care and use.
*For those peop	ple who have been unable to attend the training sessions, the fo	ollowing videotapes are available in the Upstate Librar
1.	Laboratory Animals: Laws Regulations and Guidelines	(23 minutes)
	and Alternatives to Traditional Use OR	(29 minutes)
2	Care and Use of Laboratory Animals Training Session	(42 minutes)

For those persons unable to get to the Library, Tape #2 will be available for viewing in DLAR or may be checked out from DLAR for